

# Work Order ID 118873

May-06-14 8:05:42 AM

**\*118873\***

Page 1

Item ID: D4634-145 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Aft, Center Ceiling Replacement Panel Assembly  
 Start Date: 6/09/14 Start Qty: 1.00 **\*1\*** Cust Item ID:  
 Required Date: 6/09/14 Req'd Qty: 1.00 **\*1\*** Customer:  
 Reference:

Approvals: Process Plan: MLJ Date: 14-05-07 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D4634	F

100		0.00	DAS 27 9-89	14/8/17		1			
<b>*100*</b>									
HandThermo	Memo	0.00							
Hand Finishing Thermoforming	Pick Kit								

110		0.00				1			
<b>*110*</b>									
Small Fab	Memo	0.00							
Small Fab	Assemble as per Dwg D4634-145								

1- Scuff bonding surface to eliminate in-perfections and increase bonding and clean with wash& wipe

2- Locate and glue down Channel Assy, angles, brackets, and mounting pads using 3M Plastic welder II.

Batch # m129001

Expiry Date 1/30/15

3- Apply labels as per Dwg. and seal with 3M 3950 edge sealer

DAS  
27  
9-89  
14/8/17

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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**\*118873\***

Page 2

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 Start Date: 6/09/14 Start Qty: 1.00 **\*1\*** Cust Item ID:  
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Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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120	QC6- Inspect dimensions to drawing	0.00							
<b>*120*</b>	<i>WA S</i>								
QC	Memo	0.00							
Quality Control									

125	QC5- Inspect part completeness to step on W/O ✓	0.00							
<b>*125*</b>									
QC	Memo	0.00							
Quality Control									

DAS  
9  
9-89

130	Identify as per dwg & Stock Location: <i>ml</i>	0.00							
<b>*130*</b>									
Packaging	Memo	0.00							
Packaging									

*SKF*  
*4/8/17*

*AA 14-8-7*

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



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Material									
Operator									
Offset/Setup									
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Training									
Transport									
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### FAULT CATEGORY

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Page 3

MCJ 74-08-11

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



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# Picklist Print

May-06-14 8:05:42 AM

Page 1

Work Order ID: 118873

**\*118873\***

Parent Item: D4634-145

**\*D4634-145\***

Parent Item Name: Aft, Center Ceiling Replacement Panel Assembly

Start Date: 6/09/14

Required Date: 6/09/14

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev A New Issue 13/02/05 DL VERIFIED BY:JLM IPP Rev.  
B Dwg.Update 13/07/09 DL verf: DD IPP Rev C Dwg Update  
remove channels add foam 13/12/23 DL IPP REV D 14/01/20 Dwg Update  
DL

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D4636-5		Manufactured	No			100	Each	132.0000	1	1			
<b>*D4636-5*</b>									<b>**</b>			DAS 27 9-89	
Bracket													
				<u>Location</u>				<u>Loc Qty</u>	<u>Loc Code</u>				
				MF3				25					
				111978				18					
				113948				7	B121038				
				ST115				107					
				114660				59					
				116195				48					
D4712-1		Manufactured	No			100	Each	23.0000	1	1			
<b>*D4712-1*</b>									<b>**</b>			DAS 27 9-89	
Bracket													
				<u>Location</u>				<u>Loc Qty</u>	<u>Loc Code</u>				
				MF4				13					
				111979				10					
				114661				3	B122295				
				ST120				10					
				113700				10					
D5021-5		Manufactured	No			100	Each	4.0000	1	1			
<b>*D5021-5*</b>									<b>**</b>			DAS 27 9-89	
Foam, Center Panel, Aft													
				<u>Location</u>				<u>Loc Qty</u>	<u>Loc Code</u>				
				therm				4					
				114046				4	B116255				

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

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Training									
Transport									
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Page 2

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**\*118873\***

Parent Item: D4634-145

**\*D4634-145\***

Parent Item Name: Aft, Center Ceiling Replacement Panel Assembly

Start Date: 6/09/14

Required Date: 6/09/14

Start Qty: 1.00

Required Qty: 1.00

MS20426AD3-4

Purchased

No

100

Each

7,757.000

4

4

**\*MS20426AD3-4\***

**\*\***

RIVET

Location

Loc Qty

Loc Code

MF4

329

125578

329

ST334

3180

m127432

3180

ST509

4248

125578

4248

MS20426AD4-6

Purchased

No

100

Each

2,941.000

2

2

**\*MS20426AD4-6\***

**\*\***

Rivet

Location

Loc Qty

Loc Code

MF4

102

124392

102

ST334

952

124392

952

ST336

1887

M128812

1887

MS21059L08

Purchased

No

100

Each

839.0000

2

2

**\*MS21059L08\***

**\*\***

Nut

Location

Loc Qty

Loc Code

ST508

839

123185

1

125654

838

D4634-5

Manufactured

No

100

Each

0.0000

1

1

**\*D4634-5\***

**\*\***

Aft, Center Ceiling Panel

B1200095

DAS

27

9-89

14/8/17

DAS

27

9-89

14/8/17

DAS

27

9-89

14/8/17

DAS

27

9-89

14/8/17

May-06-14 8:05:42 AM

Shop Packet Print

Page 2

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



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Work Order update only ☐

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Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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# Picklist Print

May-06-14 8:05:42 AM

Work Order ID: 118873

**\*118873\***

Parent Item: D4634-145

**\*D4634-145\***

Parent Item Name: Aft, Center Ceiling Replacement Panel Assembly

Start Date: 6/09/14

Required Date: 6/09/14

Start Qty: 1.00

Required Qty: 1.00

D4647-1 Manufactured No

100 Each 5.0000 1 1

**\*D4647-1\***

Doubler

**\*\***

DAS

Location

Loc Qty

Loc Code

MF3

5

B119839

1

27  
9-89

113949

5

D4664-5 Manufactured No

100 Each 188.0000 6 6

**\*D4664-5\***

Spacer

**\*\***

Location

Loc Qty

Loc Code

MF3

63

111711

9

115338

54

ST118

125

114727

45

114886

80

D4732-17 Manufactured No

100 Each 13.0000 1 1

**\*D4732-17\***

Label

**\*\***

DAS

Location

Loc Qty

Loc Code

MF4

13

111247

12

93378

1

B120069

1

27  
9-89

D4732-23 Manufactured No

100 Each 13.0000 1 1

**\*D4732-23\***

Label

**\*\***

Location

Loc Qty

Loc Code

MF4

13

111250

12

93280

1

B120070

27  
9-89

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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# Picklist Print

May-06-14 8:05:42 AM

Page 4

Work Order ID: 118873

**\*118873\***

Parent Item: D4634-145

**\*D4634-145\***

Parent Item Name: Aft, Center Ceiling Replacement Panel Assembly

Start Date: 6/09/14

Required Date: 6/09/14

Start Qty: 1.00

Required Qty: 1.00

D4732-27

Manufactured No

100

Each

15.0000

1

1

**\*D4732-27\***

Label

**\*\***

DAS

27

9-89

Location

Loc Qty

Loc Code

MF4

15

111252

11

93195

4

B/20074

1

14/8/7

MPNY-750S-9-C

Purchased

No

100

Each

689.0000

9

9

**\*MPNY-750S-9-C\***

Mounting Pad

**\*\***

Location

Loc Qty

Loc Code

MF4

689

124058

1

M127960

688

9

14/8/7 DAS 27 9-89

May-06-14 8:05:42 AM

Shop Packet Print

Page 4

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%; border: none;"> <tr> <td style="width:15%;">Skid-tube <input type="checkbox"/></td> <td style="width:15%;">Crosstube <input type="checkbox"/></td> <td style="width:15%;">Water Jet <input type="checkbox"/></td> <td style="width:15%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Doc/Data									
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Material									
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Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

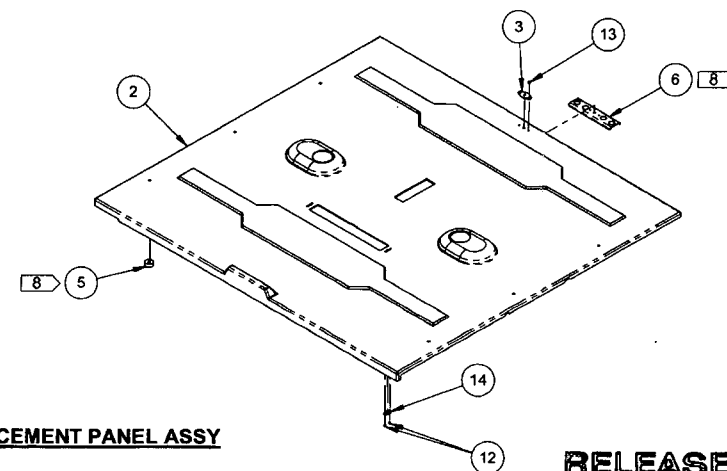
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other  _____ _____ _____
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ITEM NO.	QTY. -145	PART NUMBER	DESCRIPTION
1	X	D4634-145	AFT, CENTER CEILING REPLACEMENT PANEL ASSY
2	1	D4634-5	AFT, CENTER CEILING PANEL
3	1	D4636-5	BRACKET
4	1	D4647-1	DOUBLER
5	6	D4664-5	SPACER
6	1	D4712-1	BRACKET
7	1	D4732-17	LABEL
8	1	D4732-23	LABEL
9	1	D4732-27	LABEL
10	1	D5021-5	FOAM, CENTER PANEL, AFT
11	9	MPNY-750S-9-C	MOUNTING PAD
12	4	MS20426AD3-(4)	RIVET
13	2	MS20426AD4-(6)	RIVET
14	2	MS21059L08	ANCHOR NUT

**D4634-145 AFT, CENTER CEILING REPLACEMENT PANEL ASSY**

**NOTES:**

- 1) MATERIAL: N/A
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: N/A
- 8) APPLY A BEAD (0.20 TO 0.30 WIDE) OF DEVCON PLASTIC WELDER II (0.25 INSIDE OF BOTH EDGES OF PART)  
TO BOND D4647-1 & MPNY-750S-9-C. WAIT FOR 2 TO 4 HOURS FOR FUNCTIONAL CURE.  
LOCATE D4647-1 IN LINE WITH RECTANGULAR OPENING
- 9) LOCATE LABELS AS SHOWN, SEAL LABELS USING 3950 EDGE SEALER OVER LABEL TOP SURFACE
- 10) APPLY AN EVEN COAT OF 3M SCOTCH WELD 1300L CONTACT ADHESIVE TO BOND D5021-5 FOAM CORE TO INSIDE OF PANEL
- 11) CENTER D5021-5 FOAM ON D4634-5



**RELEASED**

2014 FEB 25 *up*

DESIGN	RF	<b>DART AEROSPACE LTD</b>	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	BC	DRAWING NO.	REV. F
MFG. APPR.	BC	<b>D4634</b>	SHEET 9 OF 17
APPROVED	BC	TITLE	SCALE
DE APPR.	BC	<b>CENTER CEILING PANELS</b>	NTS
DATE	14.02.03	COPYRIGHT © 2012 BY DART AEROSPACE LTD	
THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.			

118873  
MLJ  
1405-07